PART B - FEE(S) TRANSMITTAL and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885 or Fax should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where fespondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for INSTRUCTIONS: This for appropriate, All further conappropriate All further indicated inters corres maintenance conditions Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 07/25/2005 30449 SCHMEISER, OLSEN + WATTS Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. 3 LEAR JET LANE SUITE 201 LATHAM, NY 12110 10604899 08/23/2005 MBEYENE2 00000028 090456 (Depositor's name (Signature) 01 FC:1501 1400.00 DA 300.00 DA (Date 02 FC:1504 ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. **FILING DATE** FIRST NAMED INVENTOR BUR920030063US1 1898 10/604,899 08/26/2003 John F. Hagios TITLE OF INVENTION: WAFER TEST SPACE TRANSFORMER DATE DUE **PUBLICATION FEE** TOTAL FEE(S) DUE APPLN. TYPE SMALL ENTITY **ISSUE FEE** \$1700 10/25/2005 NO \$1400 \$300 nonprovisional **EXAMINER** ART UNIT **CLASS-SUBCLASS** 2832 336-200000 NGUYEN, TUYEN T 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list Schmeiser, Olsen & (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, Watts: Robert A (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to "Fee Address" indication (or "Fee Address" Indication form 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Walsh PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE International Business Machines Corporation, Armonk, NY Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4b. Payment of Fee(s): 4a. The following fee(s) are enclosed: Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. ☐ Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 09-0456 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) (IBM)
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